

## **Application Data Sheet**

### **Application Information**

Application number::	
Filing Date::	
Application Type::	Utility
Subject Matter::	
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	YES
Computer Readable Form (CRF)?::	YES
Number of copies of CRF::	1
Title::	Mesothelin Vaccines and Model Systems
Attorney Docket Number::	001107.00363
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	14
Small Entity?::	YES
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	NCI CA62924, NCI RO1 CA72631, NCI RO1 CA71806, U19 CA72108-02, and NCDDG RFA CA-95-020
Secrecy Order in Parent Appl.?::	NO

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: Elizabeth  
Middle Name::  
Family Name:: Jaffee  
Name Suffix::  
City of Residence:: Lutherville  
State or Province of Residence:: Maryland  
Country of Residence:: U.S.  
Street of mailing address::  
  
City of mailing address:: Lutherville  
State or Province of mailing address:: Maryland  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: Tzyy-Choou  
Middle Name::  
Family Name:: Wu  
Name Suffix::  
City of Residence:: Stevenson  
State or Province of Residence:: Maryland  
Country of Residence:: U.S.  
Street of mailing address::

City of mailing address:: Stevenson  
State or Province of mailing address:: Maryland  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: Chien-Fu  
Middle Name::  
Family Name:: Hung  
Name Suffix::  
City of Residence:: Brookville  
State or Province of Residence:: Maryland  
Country of Residence:: U.S.  
Street of mailing address::

City of mailing address:: Brookville  
State or Province of mailing address:: Maryland  
Country of mailing address:: USA  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: Ralph  
Middle Name::  
Family Name:: Hruban  
Name Suffix::  
City of Residence:: Baltimore

State or Province of Residence:: Maryland  
Country of Residence::  
Street of mailing address::  
City of mailing address:: Baltimore  
State or Province of mailing address:: Maryland  
Country of mailing address:: United States  
Postal or Zip Code of mailing address::

### Correspondence Information

Correspondence Customer Number:: 22907

### Representative Information

Representative Customer Number:: 22907

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-provisional of	60/475,783	06/05/03
	Non-provisional of	60/414,931	09/30/02
	Non-provisional of	60/398,217	07/24/02
	Non-provisional of	60/395,556	07/12/02

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee name:: The Johns Hopkins University

Street of mailing address:: 100 N. Charles Street, 5th Floor  
Fifth Floor  
City of mailing address:: Baltimore  
State or Province of mailing address:: Maryland  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 21201